

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Foundation for a Greater America, Inc.

ADDRESS (number and street)

P.O. Box 3587

Check if different
than previously
reported. (ACC)

Tustin

CA

92781

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00555862

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

C

(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

C

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Ault, Anastacia, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Ault, Anastacia, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Foundation for a Greater America, Inc.

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		3813.64
(b) Cash on Hand at Beginning of Reporting Period.....	657.83	
(c) Total Receipts (from Line 19)	62538.12	156664.32
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	63195.95	160477.96
7. Total Disbursements (from Line 31)	63148.74	160430.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	47.21	47.21
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	220051.56	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	426426.62	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Foundation for a Greater America, Inc.

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 07 / 01 / 2016

To:

 M M / D D / Y Y Y Y Y
 09 / 30 / 2016
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

57415.00

132371.55

(ii) Unitemized

5087.12

22755.77

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

62502.12

155127.32

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

62502.12

155127.32

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

36.00

1537.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

62538.12

156664.32

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

62538.12

156664.32

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	63148.74	160430.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	63148.74	160430.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	63148.74	160430.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	63148.74	160430.75

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	62502.12	155127.32
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	62502.12	155127.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	63148.74	160430.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	63148.74	160430.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Armentrout, Suzanne L., , ,

Mailing Address 2333 West 13th Street

City

The Dalles

State

OR

Zip Code

97058

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Lutheran Choral Association

Occupation (for Individual)

Director

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2016

Transaction ID : INCA4180

Amount of Each Receipt this Period

50.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Armentrout, Suzanne L., , ,

Mailing Address 2333 West 13th Street

City

The Dalles

State

OR

Zip Code

97058

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Lutheran Choral Association

Occupation (for Individual)

Director

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2016

Transaction ID : INCA4241

Amount of Each Receipt this Period

50.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Barney, Alice M., , ,

Mailing Address 8611 Cromwell Drive

City

Springfield

State

VA

Zip Code

22151

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

811.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2016

Transaction ID : INCA4323

Amount of Each Receipt this Period

25.00



Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

125.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bashaw, Patricia, , ,

Mailing Address 3122 Stelling Drive

City
Palo AltoState
CAZip Code
94303FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Palo Alto Art Center FoundationOccupation (for Individual)
Board Member

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : INCA4238

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bashaw, Patricia, , ,

Mailing Address 3122 Stelling Drive

City
Palo AltoState
CAZip Code
94303FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Palo Alto Art Center FoundationOccupation (for Individual)
Board Member

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : INCA4312

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Beck, Jacqueline B., , ,

Mailing Address 2322 Trescott Drive

City
TallahasseeState
FLZip Code
32308FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 25 / 2016

Transaction ID : INCA4219

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

850.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Beck, Jacqueline B., , ,

Mailing Address 2322 Trescott Drive

City
TallahasseeState
FLZip Code
32308FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2016

Transaction ID : INCA4263

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bergstorm, Nancy, , ,

Mailing Address 3935 Ramble Creek Drive

City
Missouri CityState
TXZip Code
77459FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of Texas HoustonOccupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 12 / 2016

Transaction ID : INCA4222

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bergstorm, Nancy, , ,

Mailing Address 3935 Ramble Creek Drive

City
Missouri CityState
TXZip Code
77459FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of Texas HoustonOccupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 10 / 2016

Transaction ID : INCA4239

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

650.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bergstrom, Nancy, , ,

Mailing Address 3935 Ramble Creek Drive

City
MissouriState
TXZip Code
77459FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : INCA4309

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bloom, Barbara D., , ,

Mailing Address 3 Woodmeadow Lane

City

Princeton Junction

State

NJ

Zip Code

08550

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
College of Staten IslandOccupation (for Individual)
Associate Professor of Nursing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2016

Transaction ID : INCA4157

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bloom, Barbara D., , ,

Mailing Address 3 Woodmeadow Lane

City

Princeton Junction

State

NJ

Zip Code

08550

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
College of Staten IslandOccupation (for Individual)
Associate Professor of Nursing

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : INCA4225

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bloom, Barbara D., , ,

Mailing Address 3 Woodmeadow Lane

City

Princeton Junction

State

NJ

Zip Code

08550

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

College of Staten Island

Occupation (for Individual)

Associate Professor of Nursing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 12 / 2016

Transaction ID : INCA4253

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bloom, Barbara D., , ,

Mailing Address 3 Woodmeadow Lane

City

Princeton Junction

State

NJ

Zip Code

08550

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

College of Staten Island

Occupation (for Individual)

Associate Professor of Nursing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : INCA4255

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bloom, Barbara D., , ,

Mailing Address 3 Woodmeadow Lane

City

Princeton Junction

State

NJ

Zip Code

08550

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

College of Staten Island

Occupation (for Individual)

Associate Professor of Nursing

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : INCA4310

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Browning, Priscilla E., , ,

Mailing Address 1 Pleasant Grove Lane

City
Ithaca

State
NY

Zip Code
14850

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Unitrust

Occupation (for Individual)
Chair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 10 / 2016

Transaction ID : INCA4167

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Browning, Priscilla E., , ,

Mailing Address 1 Pleasant Grove Lane

City
Ithaca

State
NY

Zip Code
14850

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Unitrust

Occupation (for Individual)
Chair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : INCA4296

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bussler, Edna J., , ,

Mailing Address 800 Lake Port Blvd., #H503

City
Leesburg

State
FL

Zip Code
34748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2016

Transaction ID : INCA4193

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1025.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bussler, Edna J., , ,

Mailing Address 800 Lake Port Blvd., #H503

City
Leesburg

State
FL

Zip Code
34748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 23 / 2016

Transaction ID : INCA4217

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bussler, Edna J., , ,

Mailing Address 800 Lake Port Blvd., #H503

City
Leesburg

State
FL

Zip Code
34748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : INCA4303

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clark, Susan, , ,

Mailing Address 1109 C Street

City
Juneau

State
AK

Zip Code
99801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2016

Transaction ID : INCA4195

Amount of Each Receipt this Period

36.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

136.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 99

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clark, Susan, , ,

Mailing Address 1109 C Street

City
Juneau

State
AK

Zip Code
99801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2016

Transaction ID : INCA4224

Amount of Each Receipt this Period

36.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clark, Susan, , ,

Mailing Address 1109 C Street

City
Juneau

State
AK

Zip Code
99801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : INCA4302

Amount of Each Receipt this Period

36.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Connally, G.G., , ,

Mailing Address 12 University Avenue

City
Buffalo

State
NY

Zip Code
14214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
G.G. Connally

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 12 / 2016

Transaction ID : INCA4158

Amount of Each Receipt this Period

26.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

98.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Connally, G.G., , ,

Mailing Address 12 University Avenue

City
Buffalo

State
NY

Zip Code
14214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

G.G. Connally

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

MM / DD / YYYY
08 / 03 / 2016

Transaction ID : INCA4234

Amount of Each Receipt this Period

26.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Currie, Barbara R., , ,

Mailing Address 4800 Filmore Avenue, Apt. 544

City

Alexandria

State

VA

Zip Code

22311

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY
07 / 17 / 2016

Transaction ID : INCA4181

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Darley, John M., , ,

Mailing Address 100 Bentwood Road

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
07 / 19 / 2016

Transaction ID : INCA4203

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

166.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Darley, John M., , ,

Mailing Address 100 Bentwood Road

City
West Hartford

State
CT

Zip Code
06107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : INCA4318

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Davis, Norma, , ,

Mailing Address 1308 Lasuen Drive

City
Millbrae

State
CA

Zip Code
94030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 12 / 2016

Transaction ID : INCA4156

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Davis, Norma, , ,

Mailing Address 1308 Lasuen Drive

City
Millbrae

State
CA

Zip Code
94030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

16500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2016

Transaction ID : INCA4182

Amount of Each Receipt this Period

2000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3040.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Davis, Norma, , ,

Mailing Address 1308 Lasuen Drive

City
Millbrae

State
CA

Zip Code
94030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : INCA4226

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Davis, Norma, , ,

Mailing Address 1308 Lasuen Drive

City
Millbrae

State
CA

Zip Code
94030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : INCA4232

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Davis, Norma, , ,

Mailing Address 1308 Lasuen Drive

City
Millbrae

State
CA

Zip Code
94030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

16500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : INCA4297

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Davis, Norma, , ,

Mailing Address 1308 Lasuen Drive

City
Millbrae

State
CA

Zip Code
94030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : INCA4257

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Davis, Norma, , ,

Mailing Address 1308 Lasuen Drive

City
Millbrae

State
CA

Zip Code
94030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA4285

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Davis, Robert F., , ,

Mailing Address 50 Lynthwaite Road

City
Wilmington

State
DE

Zip Code
19803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tomark Industries, Inc.

Occupation (for Individual)
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : INCA4233

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Davis, Robert F., , ,

Mailing Address 50 Lynthwaite Road

City
Wilmington

State
DE

Zip Code
19803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tomark Industries, Inc.

Occupation (for Individual)
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

08 / 14 / 2016

Transaction ID : INCA4258

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Davis, Robert F., , ,

Mailing Address 50 Lynthwaite Road

City
Wilmington

State
DE

Zip Code
19803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tomark Industries, Inc.

Occupation (for Individual)
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

08 / 27 / 2016

Transaction ID : INCA4286

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Durrwachter, Sylvia, , ,

Mailing Address 809 West 5th Street

City
Port Angeles

State
WA

Zip Code
98363

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

07 / 14 / 2016

Transaction ID : INCA4201

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Durrwachter, Sylvia, , ,

Mailing Address 809 West 5th Street

City
Port Angeles

State
WA

Zip Code
98363

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : INCA4319

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Eads, Paul, , ,

Mailing Address 13723 South 18th Street

City
Bixby

State
OK

Zip Code
74008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 25 / 2016

Transaction ID : INCA4220

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Eads, Paul, , ,

Mailing Address 13723 South 18th Street

City
Bixby

State
OK

Zip Code
74008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2016

Transaction ID : INCA4280

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

15100.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 99
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Flavin, Joan D., , ,

Mailing Address 5855 North Sheridan Road, Apt. 18H

City
ChicagoState
ILZip Code
60660FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2016

Transaction ID : INCA4291

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fraser, Edie A., , ,

Mailing Address 2916 32nd Street NW

City
WashingtonState
DCZip Code
20008FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STEMconnectorOccupation (for Individual)
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2016

Transaction ID : INCA4168

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fraser, Edie A., , ,

Mailing Address 2916 32nd Street NW

City
WashingtonState
DCZip Code
20008FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STEMconnectorOccupation (for Individual)
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2016

Transaction ID : INCA4287

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

500.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fressola, Ralph, , ,

Mailing Address 2255 Armstrong Court, SW

City

Conyers

State

GA

Zip Code

30094

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Ralph Fressola

Occupation (for Individual)

Business Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 11 / 2016

Transaction ID : INCA4163

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fressola, Ralph, , ,

Mailing Address 2255 Armstrong Court, SW

City

Conyers

State

GA

Zip Code

30094

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Ralph Fressola

Occupation (for Individual)

Business Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 15 / 2016

Transaction ID : INCA4264

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gingiss, Randall J., , ,

Mailing Address 1035 Valley View Drive

City

Vermillion

State

SD

Zip Code

57069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

University of South Dakota

Occupation (for Individual)

Professor

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

07 / 10 / 2016

Transaction ID : INCA4169

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gingiss, Randall J., , ,

Mailing Address 1035 Valley View Drive

City
Vermillion

State
SD

Zip Code
57069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

University of South Dakota

Occupation (for Individual)

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

08 / 15 / 2016

Transaction ID : INCA4266

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gingiss, Randall J., , ,

Mailing Address 1035 Valley View Drive

City
Vermillion

State
SD

Zip Code
57069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

University of South Dakota

Occupation (for Individual)

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

09 / 05 / 2016

Transaction ID : INCA4267

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Goldberg, Gerald, , ,

Mailing Address 20 Van Akenen, Unit 310

City
Shaker Heights

State
OH

Zip Code
44122

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

07 / 01 / 2016

Transaction ID : INCA4187

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 99
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Goldberg, Gerald, , ,

Mailing Address 20 Van Akenen, Unit 310

City

Shaker Heights

State

OH

Zip Code

44122

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2016

Transaction ID : INCA4320

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hainline, Louise, , ,

Mailing Address 9 Prospect Park W

City

Brooklyn

State

NY

Zip Code

11215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Brooklyn CollegeOccupation (for Individual)
Professor

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2016

Transaction ID : INCA4261

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Halsey, George A., , ,

Mailing Address 111 Camellia Way

City

Hendersonville

State

NC

Zip Code

28739

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2016

Transaction ID : INCA4175

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

550.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Halsey, George A., , ,

Mailing Address 111 Camellia Way

City
Hendersonville

State
NC

Zip Code
28739

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : INCA4304

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Haubold, Mary E., , ,

Mailing Address 5747 Southwest 22nd Terrace

City
Topeka

State
KS

Zip Code
66614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : INCA4202

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Haubold, Mary E., , ,

Mailing Address 5747 Southwest 22nd Terrace

City
Topeka

State
KS

Zip Code
66614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : INCA4228

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hayes, Cecil E., , ,

Mailing Address 5229 Ivanhoe Place, NE

City
SeattleState
WAZip Code
98105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Cecil E. Hayes

Occupation (for Individual)

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : INCA4268

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hayes, Cecil E., , ,

Mailing Address 5229 Ivanhoe Place, NE

City
SeattleState
WAZip Code
98105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Cecil E. Hayes

Occupation (for Individual)

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 28 / 2016

Transaction ID : INCA4281

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Henderson, Gloria M., , ,

Mailing Address 2442 Chapel Hill Road

City
GriffinState
GAZip Code
30224FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 27 / 2016

Transaction ID : INCA4221

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

200.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Henderson, Gloria M., , ,

Mailing Address 2442 Chapel Hill Road

City
Griffin

State
GA

Zip Code
30224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : INCA4270

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Henderson, Gloria M., , ,

Mailing Address 2442 Chapel Hill Road

City
Griffin

State
GA

Zip Code
30224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2016

Transaction ID : INCA4288

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Henderson, Gloria M., , ,

Mailing Address 2442 Chapel Hill Road

City
Griffin

State
GA

Zip Code
30224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2016

Transaction ID : INCA4337

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 99
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Huber, Jeanne, , ,

Mailing Address 5341 Cove Garden Road

City
Covesville

State
VA

Zip Code
22931

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2016

Transaction ID : INCA4324

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hull, Brooke B., , ,

Mailing Address 7010 Southwest Rice Court

City
Portland

State
OR

Zip Code
97223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Brooke B. Hull

Occupation (for Individual)
Certified Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2016

Transaction ID : INCA4188

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hull, Brooke B., , ,

Mailing Address 7010 Southwest Rice Court

City
Portland

State
OR

Zip Code
97223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Brooke B. Hull

Occupation (for Individual)
Certified Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : INCA4272

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hull, Brooke B., , ,

Mailing Address 7010 Southwest Rice Court

City
Portland

State
OR

Zip Code
97223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Brooke B. Hull

Occupation (for Individual)

Certified Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : INCA4315

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ireland, Sue A., , ,

Mailing Address 1151 North Rush Street

City
Gary

State
IN

Zip Code
46403

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

U.S. Government

Occupation (for Individual)

Investigator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2016

Transaction ID : INCA4196

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ireland, Sue A., , ,

Mailing Address 1151 North Rush Street

City
Gary

State
IN

Zip Code
46403

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

U.S. Government

Occupation (for Individual)

Investigator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 24 / 2016

Transaction ID : INCA4216

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ireland, Sue A., , ,

Mailing Address 1151 North Rush Street

City
GaryState
INZip Code
46403FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
U.S. GovernmentOccupation (for Individual)
Investigator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2016

Transaction ID : INCA4278

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Isreal, Lesley L., , ,

Mailing Address P.O. Box 69

City

Royal Oak

State

MD

Zip Code

21662

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2016

Transaction ID : INCA4194

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Isreal, Lesley L., , ,

Mailing Address P.O. Box 69

City

Royal Oak

State

MD

Zip Code

21662

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

8675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 15 / 2016

Transaction ID : INCA4160

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1300.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 OF 99

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Isreal, Lesley L., , ,

Mailing Address P.O. Box 69

City
Royal Oak

State
MD

Zip Code
21662

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : INCA4229

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Isreal, Lesley L., , ,

Mailing Address P.O. Box 69

City
Royal Oak

State
MD

Zip Code
21662

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA4313

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Karp, Carol D., , ,

Mailing Address 2120 Geri Lane

City
Hillsborough

State
CA

Zip Code
94010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Janssen Alzheimer Immunotherapy Resear

Occupation (for Individual)
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2016

Transaction ID : INCA4283

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1800.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kimling, L. Erlenmeyer, , ,

Mailing Address 1 Briarwood Lane

City
StamfordState
CTZip Code
06903FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 12 / 2016

Transaction ID : INCA4153

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kimling, L. Erlenmeyer, , ,

Mailing Address 1 Briarwood Lane

City
StamfordState
CTZip Code
06903FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 07 / 2016

Transaction ID : INCA4236

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kimling, L. Erlenmeyer, , ,

Mailing Address 1 Briarwood Lane

City
StamfordState
CTZip Code
06903FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

12250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2016

Transaction ID : INCA4282

Amount of Each Receipt this Period

2000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

6000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 99
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. King, Earl, , ,

Mailing Address 14505 Stetson Road

City
Los Gatos

State
CA

Zip Code
95033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 16 / 2016

Transaction ID : INCA4176

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. King, Earl, , ,

Mailing Address 14505 Stetson Road

City
Los Gatos

State
CA

Zip Code
95033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2016

Transaction ID : INCA4292

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lampson, Claire G., , ,

Mailing Address 18899 Independence Lane

City
Geyserville

State
CA

Zip Code
95941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Copeland & Therman

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2016

Transaction ID : INCA4191

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lampson, Claire G., , ,

Mailing Address 18899 Independence Lane

City
Geyserville

State
CA

Zip Code
95941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Copeland & Therman

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 13 / 2016

Transaction ID : INCA4207

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lampson, Claire G., , ,

Mailing Address 18899 Independence Lane

City
Geyserville

State
CA

Zip Code
95941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Copeland & Therman

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 10 / 2016

Transaction ID : INCA4240

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lampson, Claire G., , ,

Mailing Address 18899 Independence Lane

City
Geyserville

State
CA

Zip Code
95941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Copeland & Therman

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2016

Transaction ID : INCA4290

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 OF 99

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lampson, Claire G., , ,

Mailing Address 18899 Independence Lane

City
Geyserville

State
CA

Zip Code
95941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Copeland & Therman

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2016

Transaction ID : INCA4269

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Matthews, Winston, , ,

Mailing Address 587 Lenox Road

City
Brooklyn

State
NY

Zip Code
11203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Winston Matthews

Occupation (for Individual)
Business Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 10 / 2016

Transaction ID : INCA4242

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McAdams, Robert, , ,

Mailing Address 9753 Keeneland Row

City
La Jolla

State
CA

Zip Code
92037

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2016

Transaction ID : INCA4199

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 35 OF 99
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Monahan, Janice C., , ,

Mailing Address 1130 Bridlewood Way

City
RenoState
NVZip Code
89509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M	D D	Y Y Y Y
07	13	2016

Transaction ID : INCA4208

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Monahan, Janice C., , ,

Mailing Address 1130 Bridlewood Way

City
RenoState
NVZip Code
89509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M	D D	Y Y Y Y
08	07	2016

Transaction ID : INCA4237

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Monahan, Janice C., , ,

Mailing Address 1130 Bridlewood Way

City
RenoState
NVZip Code
89509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M	D D	Y Y Y Y
09	16	2016

Transaction ID : INCA4321

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

150.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Morrison, Ronald, , ,

Mailing Address 9116 Northeast 21st Court

City

Vancouver

State

WA

Zip Code

98665

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2016

Transaction ID : INCA4248

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Murnik, Mary, , ,

Mailing Address 331 West Slossan Avenue

City

Reed City

State

MI

Zip Code

49677

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Ferris State University

Occupation (for Individual)

Professor

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2016

Transaction ID : INCA4192

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Murnik, Mary, , ,

Mailing Address 331 West Slossan Avenue

City

Reed City

State

MI

Zip Code

49677

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Ferris State University

Occupation (for Individual)

Professor

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : INCA4279

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

350.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 99

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Neil, Mary C., , ,

Mailing Address 2618 Starlight Court

City
San Antonio

State
TX

Zip Code
78261

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

07 / 10 / 2016

Transaction ID : INCA4171

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Neil, Mary C., , ,

Mailing Address 2618 Starlight Court

City
San Antonio

State
TX

Zip Code
78261

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

07 / 12 / 2016

Transaction ID : INCA4155

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Neil, Mary C., , ,

Mailing Address 2618 Starlight Court

City
San Antonio

State
TX

Zip Code
78261

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

08 / 01 / 2016

Transaction ID : INCA4230

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 OF 99

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Neil, Mary C., , ,

Mailing Address 2618 Starlight Court

City
San Antonio

State
TX

Zip Code
78261

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

08 / 10 / 2016

Transaction ID : INCA4244

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Neil, Mary C., , ,

Mailing Address 2618 Starlight Court

City
San Antonio

State
TX

Zip Code
78261

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

08 / 12 / 2016

Transaction ID : INCA4254

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Neil, Mary C., , ,

Mailing Address 2618 Starlight Court

City
San Antonio

State
TX

Zip Code
78261

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

09 / 01 / 2016

Transaction ID : INCA4260

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Neil, Mary C., , ,

Mailing Address 2618 Starlight Court

City
San Antonio

State
TX

Zip Code
78261

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

09 / 10 / 2016

Transaction ID : INCA4295

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Neil, Mary C., , ,

Mailing Address 2618 Starlight Court

City
San Antonio

State
TX

Zip Code
78261

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

09 / 12 / 2016

Transaction ID : INCA4311

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Nguyen, Van D. Hanh, , ,

Mailing Address 548 International Blvd.

City
Oakland

State
CA

Zip Code
94606

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

07 / 13 / 2016

Transaction ID : INCA4209

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Nguyen, Van D. Hanh, , ,

Mailing Address 548 International Blvd.

City
Oakland

State
CA

Zip Code
94606

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

MM / DD / YYYY
08 / 04 / 2016

Transaction ID : INCA4235

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Passell, Nicholas, , ,

Mailing Address 524 Lincoln Avenue

City
Eau Claire

State
WI

Zip Code
54701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nicholas Passell

Occupation (for Individual)
Business Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY
07 / 21 / 2016

Transaction ID : INCA4215

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Passell, Nicholas, , ,

Mailing Address 524 Lincoln Avenue

City
Eau Claire

State
WI

Zip Code
54701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nicholas Passell

Occupation (for Individual)
Business Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY
09 / 21 / 2016

Transaction ID : INCA4326

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

625.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Podolsky, Kathleen M., , ,

Mailing Address 300 Davey Glen Road, Apt. 3925

City
Belmont

State
CA

Zip Code
94002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : INCA4212

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pugh, Margaret M., , ,

Mailing Address 1011 D Street

City
Juneau

State
AK

Zip Code
99801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2016

Transaction ID : INCA4331

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pugh, Margaret M., , ,

Mailing Address 1011 D Street

City
Juneau

State
AK

Zip Code
99801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2016

Transaction ID : INCA4271

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pugh, Margaret M., , ,

Mailing Address 1011 D Street

City

Juneau

State

AK

Zip Code

99801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 25 / 2016

Transaction ID : INCA4336

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ritti, Alyce Rey, , ,

Mailing Address 170 Cherrywood Way

City

Port Matilda

State

PA

Zip Code

16870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 10 / 2016

Transaction ID : INCA4172

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ritti, Alyce Rey, , ,

Mailing Address 170 Cherrywood Way

City

Port Matilda

State

PA

Zip Code

16870

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2016

Transaction ID : INCA4245

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

500.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Robinson, Virginia L., , ,

Mailing Address 2727 31st Avenue, South

City
SeattleState
WAZip Code
98144FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2016

Transaction ID : INCA4198

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Robinson, Virginia L., , ,

Mailing Address 2727 31st Avenue, South

City
SeattleState
WAZip Code
98144FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2016

Transaction ID : INCA4247

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rosen, Alexandra E., , ,

Mailing Address 50 Taylor Road

City
Mount CiscoState
NYZip Code
10549FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 10 / 2016

Transaction ID : INCA4173

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rosen, Alexandra E., , ,

Mailing Address 50 Taylor Road

City

Mount Cisco

State

NY

Zip Code

10549

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

09 / 09 / 2016

Transaction ID : INCA4306

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rosen, Ruth W., , ,

Mailing Address 5 Mount Hood Court

City

San Rafael

State

CA

Zip Code

94903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

07 / 01 / 2016

Transaction ID : INCA4189

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rosen, Ruth W., , ,

Mailing Address 5 Mount Hood Court

City

San Rafael

State

CA

Zip Code

94903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

925.00

Date of Receipt

08 / 15 / 2016

Transaction ID : INCA4274

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

675.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rosen, Ruth W., , ,

Mailing Address 5 Mount Hood Court

City
San Rafael

State
CA

Zip Code
94903

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2016

Transaction ID : INCA4273

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schelling, Alice Coleman, , ,

Mailing Address 8300 Burdette Road

City
Bethesda

State
MD

Zip Code
20817

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 23 / 2016

Transaction ID : INCA4218

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sims, Donald R., , ,

Mailing Address 130 Baywatch Circle

City
Fayetteville

State
GA

Zip Code
30215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : INCA4213

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sims, Donald R., , ,

Mailing Address 130 Baywatch Circle

City
Fayetteville

State
GA

Zip Code
30215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 26 / 2016

Transaction ID : INCA4299

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sims, Donald R., , ,

Mailing Address 130 Baywatch Circle

City
Fayetteville

State
GA

Zip Code
30215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 22 / 2016

Transaction ID : INCA4334

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Smith, Sara Dawn, , ,

Mailing Address 3717 Mount Rainer Drive, NE

City
Albuquerque

State
NM

Zip Code
87111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 17 / 2016

Transaction ID : INCA4183

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Smith, Shirley, , ,

Mailing Address 6 Veterans Road, Unit 21

City
Amherst

State
NH

Zip Code
03031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 14 / 2016

Transaction ID : INCA4262

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Smith, Walter, , ,

Mailing Address 1803 Hickory Avenue

City
Niceville

State
FL

Zip Code
32578

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United States Army

Occupation (for Individual)
Air Force Captain

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2016

Transaction ID : INCA4205

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Smith, Walter, , ,

Mailing Address 1803 Hickory Avenue

City
Niceville

State
FL

Zip Code
32578

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
United States Army

Occupation (for Individual)
Air Force Captain

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 27 / 2016

Transaction ID : INCA4252

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stahl, Jonnie B., , ,

Mailing Address 601 Laurel Avenue, Apt. 802

City

San Mateo

State

CA

Zip Code

94401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 11 / 2016

Transaction ID : INCA4164

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stahl, Jonnie B., , ,

Mailing Address 601 Laurel Avenue, Apt. 802

City

San Mateo

State

CA

Zip Code

94401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2016

Transaction ID : INCA4275

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stelzner, Patricia, , ,

Mailing Address 3521 Campbell Court NW

City

Albuquerque

State

NM

Zip Code

87104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

5100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 11 / 2016

Transaction ID : INCA4165

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

600.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stelzner, Patricia, , ,

Mailing Address 3521 Campbell Court NW

City
Albuquerque

State
NM

Zip Code
87104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 16 / 2016

Transaction ID : INCA4178

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Stelzner, Patricia, , ,

Mailing Address 3521 Campbell Court NW

City
Albuquerque

State
NM

Zip Code
87104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2016

Transaction ID : INCA4249

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stelzner, Patricia, , ,

Mailing Address 3521 Campbell Court NW

City
Albuquerque

State
NM

Zip Code
87104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2016

Transaction ID : INCA4308

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1850.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Taylor, Diana, , ,

Mailing Address 640 Davis Street, Apt. 13

City

San Francisco

State

CA

Zip Code

94111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 16 / 2016

Transaction ID : INCA4276

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Torres, Rosa M., , ,

Mailing Address 12411 Felton Avenue

City

Hawthorne

State

CA

Zip Code

90250

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Lawndale Elementary School District

Occupation (for Individual)

Preschool Resource Teacher

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

07 / 12 / 2016

Transaction ID : INCA4154

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Torres, Rosa M., , ,

Mailing Address 12411 Felton Avenue

City

Hawthorne

State

CA

Zip Code

90250

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Lawndale Elementary School District

Occupation (for Individual)

Preschool Resource Teacher

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

09 / 10 / 2016

Transaction ID : INCA4298

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weinman, Diann L., , ,

Mailing Address 4310 Northwest 6th Drive

City
Des Moines

State
IA

Zip Code
50313

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

MM / DD / YYYY
07 / 14 / 2016

Transaction ID : INCA4200

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Weinman, Diann L., , ,

Mailing Address 4310 Northwest 6th Drive

City
Des Moines

State
IA

Zip Code
50313

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

MM / DD / YYYY
08 / 11 / 2016

Transaction ID : INCA4250

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. White, Nancy M., , ,

Mailing Address 1516 Enyart Way, #204

City
Annapolis

State
MD

Zip Code
21409

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

MM / DD / YYYY
07 / 15 / 2016

Transaction ID : INCA4162

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. White, Nancy M., , ,

Mailing Address 1516 Enyart Way, #204

City
AnnapolisState
MDZip Code
21409FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2016

Transaction ID : INCA4251

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. White, Nancy M., , ,

Mailing Address 1516 Enyart Way, #204

City
AnnapolisState
MDZip Code
21409FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2016

Transaction ID : INCA4300

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wickham, Thomas, , ,

Mailing Address P.O. Box 928

City
CutchogueState
NYZip Code
11935FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 20 / 2016

Transaction ID : INCA4214

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

800.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wickham, Thomas, , ,

Mailing Address P.O. Box 928

City

Cutchogue

State

NY

Zip Code

11935

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2016

Transaction ID : INCA4284

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Williams, Elizabeth S., , ,

Mailing Address 2 Bishop Gadsden Way

City

Charleston

State

SC

Zip Code

29412

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2016

Transaction ID : INCA4186

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Williams, Elizabeth S., , ,

Mailing Address 2 Bishop Gadsden Way

City

Charleston

State

SC

Zip Code

29412

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 10 / 2016

Transaction ID : INCA4174

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

450.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 OF 99
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Williams, Elizabeth S., , ,

Mailing Address 2 Bishop Gadsden Way

City
Charleston

State
SC

Zip Code
29412

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : INCA4231

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Williams, Elizabeth S., , ,

Mailing Address 2 Bishop Gadsden Way

City
Charleston

State
SC

Zip Code
29412

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : INCA4301

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Williams, Elizabeth S., , ,

Mailing Address 2 Bishop Gadsden Way

City
Charleston

State
SC

Zip Code
29412

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2016

Transaction ID : INCA4277

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 99

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Williams, Elizabeth S., , ,

Mailing Address 2 Bishop Gadsden Way

City
Charleston

State
SC

Zip Code
29412

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : INCA4335

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Woolbright, Cynthia, , ,

Mailing Address 667 Midship Circle

City
Webster

State
NY

Zip Code
14580

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cynthia Woolbright

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2016

Transaction ID : INCA4322

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Zimmer, Deborah L., , ,

Mailing Address 648 Kirk Glen Drive

City
San Jose

State
CA

Zip Code
95133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

616.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 13 / 2016

Transaction ID : INCA4256

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

57415.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 56 OF 99

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Ault III, Milton C., , ,

Mailing Address 13101 Cottonwood

City
Santa AnaState
CAZip Code
92705Purpose of Disbursement
Strategic Planning Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		27		2016

FEC Identification Number

C

Transaction ID : EXPB4052

Amount of Each Disbursement this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ault III, Milton C., , ,

Mailing Address 13101 Cottonwood

City
Santa AnaState
CAZip Code
92705Purpose of Disbursement
Strategic Planning Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		28		2016

FEC Identification Number

C

Transaction ID : EXPB4054

Amount of Each Disbursement this Period

800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ault III, Milton C., , ,

Mailing Address 13101 Cottonwood

City
Santa AnaState
CAZip Code
92705Purpose of Disbursement
Strategic Planning Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		29		2016

FEC Identification Number

C

Transaction ID : EXPB4055

Amount of Each Disbursement this Period

700.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1850.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 99

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Ault III, Milton C., , ,

Mailing Address 13101 Cottonwood

City
Santa AnaState
CAZip Code
92705Purpose of Disbursement
Strategic Planning Consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				3	0		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4056

Amount of Each Disbursement this Period

850.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ault III, Milton C., , ,

Mailing Address 13101 Cottonwood

City
Santa AnaState
CAZip Code
92705Purpose of Disbursement
Strategic Planning Consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				3	1		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4058

Amount of Each Disbursement this Period

700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ault III, Milton C., , ,

Mailing Address 13101 Cottonwood

City
Santa AnaState
CAZip Code
92705Purpose of Disbursement
Strategic Planning Consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				0	4		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4059

Amount of Each Disbursement this Period

1750.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3300.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 99

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Ault, Anastasia, , ,

Mailing Address 8686 Merced Circle, Unit 1007 D

City
Costa MesaState
CAZip Code
92626Purpose of Disbursement
Office Supplies

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4053

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ault, Anastasia, , ,

Mailing Address 8686 Merced Circle, Unit 1007 D

City
Costa MesaState
CAZip Code
92626Purpose of Disbursement
Office Supplies

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	0			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4057

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ault, Anastasia, , ,

Mailing Address 8686 Merced Circle, Unit 1007 D

City
Costa MesaState
CAZip Code
92626Purpose of Disbursement
Office Supplies

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4067

Amount of Each Disbursement this Period

200.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

700.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 99

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Ault, Anastasia, , ,

Mailing Address 8686 Merced Circle, Unit 1007 D

City
Costa MesaState
CAZip Code
92626Purpose of Disbursement
Office Supplies

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	8				2	3					2	0	1	6

FEC Identification Number

C

Transaction ID : EXPB4034

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ault, Anastasia, , ,

Mailing Address 8686 Merced Circle, Unit 1007 D

City
Costa MesaState
CAZip Code
92626Purpose of Disbursement
Office Supplies

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	9				1	2					2	0	1	6

FEC Identification Number

C

Transaction ID : EXPB4035

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ault, Anastasia, , ,

Mailing Address 8686 Merced Circle, Unit 1007 D

City
Costa MesaState
CAZip Code
92626Purpose of Disbursement
Office Supplies

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	9				1	5					2	0	1	6

FEC Identification Number

C

Transaction ID : EXPB4072

Amount of Each Disbursement this Period

200.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

550.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 99

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4048

Amount of Each Disbursement this Period

7000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4049

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	9			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4077

Amount of Each Disbursement this Period

9500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

19000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 99

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2016

FEC Identification Number

C

Transaction ID : EXPB4060

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

FEC Identification Number

C

Transaction ID : EXPB4061

Amount of Each Disbursement this Period

600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

FEC Identification Number

C

Transaction ID : EXPB4062

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

6600.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 99

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

FEC Identification Number

C

Transaction ID : EXPB4066

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

FEC Identification Number

C

Transaction ID : EXPB4078

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

FEC Identification Number

C

Transaction ID : EXPB4079

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

7000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 99

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2016

FEC Identification Number

C

Transaction ID : EXPB4080

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		13		2016

FEC Identification Number

C

Transaction ID : EXPB4069

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bandb, Ltd.

Mailing Address 132 Old Sib Road

City
RidgefieldState
CTZip Code
06877Purpose of Disbursement
Telephone Fundraising Services

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2016

FEC Identification Number

C

Transaction ID : EXPB4071

Amount of Each Disbursement this Period

1900.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

13400.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 99

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Deane & Company

Mailing Address 1787 Tribute Road, Suite K

City
SacramentoState
CAZip Code
95815Purpose of Disbursement
Reporting Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	7		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4022

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Deane & Company

Mailing Address 1787 Tribute Road, Suite K

City
SacramentoState
CAZip Code
95815Purpose of Disbursement
Reporting Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	3		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4023

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Gottlieb, Gary R., , ,

Mailing Address P.O. Box 3587

City
TustinState
CAZip Code
92781Purpose of Disbursement
Administrative Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	5		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4050

Amount of Each Disbursement this Period

300.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2300.00

X	21b		22		23		26		27
	28a		28b		28c		29		30b

Foundation for a Greater America, Inc.

A. Microsoft Office 365

Three digital displays are shown, each with a row of small squares above the main display area. The first display shows '07' with two squares above it. The second display shows '01' with two squares above it. The third display shows '2016' with four squares above it.

Zip Code
98052

001

Category/
Type

☐ Primary ☐ General
☐ Other (specify) ▼

District:

C

20.00

 Memo Item

B. Microsoft Office 365

Zip Code
98052

001

Category/
Type

☐ Primary ☐ General
☐ Other (specify) _____

District:

C

Amount of Each Disbursement this Period

24.00

Memo Item

C. Microsoft Office 365

Three digital displays showing the date 08/16/2016 in MM/DD/YYYY format. The first display shows '08' with 'M' above it. The second display shows '16' with 'D' above it. The third display shows '2016' with 'Y' above it. Each display has a small square indicator above each digit.

Zip Code
98052

001

Category/
Type

☐ Primary ☐ General
☐ Other (specify) ▼

District:

C

Amount of Each Disbursement this Period

20.00

Memo Item

Grade	Number of Students
1st	64
2nd	56
3rd	48
4th	40
5th	32
6th	24

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 68 OF 99

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Remcho, Johansen & Purcell, LLP

Mailing Address 1127 11th Street, Suite 602

City
SacramentoState
CAZip Code
95814Purpose of Disbursement
Legal Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4036

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sprint

Mailing Address 6200 Sprint Parkway

City
Overland ParkState
KSZip Code
66251Purpose of Disbursement
Telephone

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4046

Amount of Each Disbursement this Period

185.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Time Warner Cable

Mailing Address 60 Columbus Circle

City
New York CityState
NYZip Code
10023Purpose of Disbursement
Internet Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4045

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1285.23

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 99

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4083

Amount of Each Disbursement this Period

27.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4084

Amount of Each Disbursement this Period

1380.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4394

Amount of Each Disbursement this Period

16.27

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1423.69

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 70 OF 99

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				1	0		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4086

Amount of Each Disbursement this Period

1361.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				1	0		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4085

Amount of Each Disbursement this Period

27.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				0	2		2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4087

Amount of Each Disbursement this Period

14.42

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1403.36

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 71 OF 99

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4088

Amount of Each Disbursement this Period

663.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4090

Amount of Each Disbursement this Period

515.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4089

Amount of Each Disbursement this Period

515.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1693.13

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 72 OF 99

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City
AuroraState
COZip Code
80014Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4091

Amount of Each Disbursement this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. U.S. Bank

Mailing Address 16061 Brookhurst Street

City
Fountain ValleyState
CAZip Code
92708Purpose of Disbursement
Bank Fee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4393

Amount of Each Disbursement this Period

7.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. U.S. Bank

Mailing Address 16061 Brookhurst Street

City
Fountain ValleyState
CAZip Code
92708Purpose of Disbursement
Bank Fee

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB4063

Amount of Each Disbursement this Period

82.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.00

X	21b		22		23		26		27
	28a		28b		28c		29		30b

Foundation for a Greater America, Inc.

A. U.S. Bank

001

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Memo Item

B. U.S. Bank

001

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

Memo Item

C.

Category/ Type	Count	Percentage
Category 1	10	10.0%
Category 2	20	20.0%
Category 3	30	30.0%
Category 4	40	40.0%
Category 5	50	50.0%
Category 6	60	60.0%
Category 7	70	70.0%
Category 8	80	80.0%
Category 9	90	90.0%
Category 10	100	100.0%

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Memo Item

262.45

63029.86

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : RCVC3469

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Finiks Capital, LLCN ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 3625 W. MacArthur Blvd., #302

City

Santa Ana

State

CA

ZIP Code

92704

Original Amount of Loan

43813.34

Cumulative Payment To Date

23461.78

Balance Outstanding at Close of This Period

20351.56

TERMS

Date Incurred

M M / D D / Y Y Y Y
11 / 17 / 2014

Date Due

M M / D D / Y Y Y Y
11 / 17 / 2017

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

20351.56

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : RCVC3461

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Finiks Capital, LLCN ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 3625 W. MacArthur Blvd., #302

City

Santa Ana

State

CA

ZIP Code

92704

Original Amount of Loan

21100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

21100.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
11 / 18 / 2014

Date Due

M M / D D / Y Y Y Y
11 / 18 / 2017

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

21100.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 76 OF 99

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : RCVC3501

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Finiks Capital, LLC**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 3625 W. MacArthur Blvd., #302

City

Santa Ana

State

CA

ZIP Code

92704

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
11 / 18 / 2014

Date Due

M M / D D / Y Y Y Y
05 / 18 / 2017

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

100000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 77 OF 99

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : RCVC3956

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Finiks Capital, LLC☒ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 3625 W. MacArthur Blvd., #302

City

Santa Ana

State

CA

ZIP Code

92704

Original Amount of Loan

1200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1200.00

TERMS

Date Incurred

MM / DD / YYYY
01 / 30 / 2015

Date Due

MM / DD / YYYY
01 / 30 / 2017

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1200.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : RCVC3958

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Finiks Capital, LLCN ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 3625 W. MacArthur Blvd., #302

City

Santa Ana

State

CA

ZIP Code

92704

Original Amount of Loan

77400.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

77400.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
01 / 30 / 2015

Date Due

M M / D D / Y Y Y Y
01 / 30 / 2017

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

77400.00

TOTALS This Period (last page in this line only)..... ►

220051.56

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 79 OF 99

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC3820

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Church, Judson A., , ,**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 764 Pines Lake Drive West

City

Wayne

State

NJ

ZIP Code

07470

Original Amount of Loan

250000.00

Cumulative Payment To Date

53050.00

Balance Outstanding at Close of This Period

196950.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
01 / 27 / 2015

Date Due

M M / D D / Y Y Y Y
11 / 23 / 2016

Interest Rate

15.00 % (apr)

Secured:

☐ Yes ☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

196950.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A=N5HCB
.

Form/Schedule: SC/10

Transaction ID : PAYC3820

Loan Received; See Schedule C

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC1950

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Church, Judson A., , ,**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 764 Pines Lake Drive West

City

Wayne

State

NJ

ZIP Code

07470

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 23 / 2015

Date Due

M M / D D / Y Y Y Y
07 / 23 / 2017

Interest Rate

15.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

10000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SC/10

Transaction ID : PAYC1950

Loan Received; See Schedule C

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC3812

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
CrossClick Media, Inc.☒ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 8725 S. Eastern Avenue, #200-661

City

Las Vegas

State

NV

ZIP Code

89123

Original Amount of Loan

26500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

26500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 13 / 2015

Date Due

M M / D D / Y Y Y Y
11 / 30 / 2016

Interest Rate

10.00 % (apr)

Secured:

☐ Yes ☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

26500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 84 OF 99

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC3816

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
CrossClick Media, Inc.☒ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 8725 S. Eastern Avenue, #200-661

City

Las Vegas

State

NV

ZIP Code

89123

Original Amount of Loan

19000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

19000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 13 / 2015

Date Due

M M / D D / Y Y Y Y
11 / 30 / 2016

Interest Rate

10.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

19000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC3818

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
CrossClick Media, Inc.☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 8725 S. Eastern Avenue, #200-661

City

Las Vegas

State

NV

ZIP Code

89123

Original Amount of Loan

13200.00

Cumulative Payment To Date

9676.79

Balance Outstanding at Close of This Period

3523.21

TERMS

Date Incurred

M M / D D / Y Y Y Y
05 / 13 / 2015

Date Due

M M / D D / Y Y Y Y
11 / 30 / 2016

Interest Rate

10.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

3523.21

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC1964

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Finiks Capital, LLC☒ N ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 3625 W. MacArthur Blvd., #302

City

Santa Ana

State

CA

ZIP Code

92704

Original Amount of Loan

12400.00

Cumulative Payment To Date

2695.00

Balance Outstanding at Close of This Period

9705.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
07 / 06 / 2015

Date Due

M M / D D / Y Y Y Y
07 / 06 / 2017

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

9705.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 87 OF 99

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC3298

Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)
Finiks Capital, LLC☒ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 3625 W. MacArthur Blvd., #302

City

Santa Ana

State

CA

ZIP Code

92704

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
10 / 21 / 2015

Date Due

M M / D D / Y Y Y Y
10 / 21 / 2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

TOTALS This Period (last page in this line only)..... ►

270678.21

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 88 OF 99

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Aristotle International, Inc.

Nature of Debt (Purpose):

Card Processing & Web Design Services

Mailing Address 205 Pennsylvania Avenue SE

City

Washington

State

DC

Zip Code

20003

Outstanding Balance Beginning This Period

2550.00

Transaction ID : PAYD3515

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2550.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Aristotle International, Inc.

Nature of Debt (Purpose):

Merchant Fees

Mailing Address 205 Pennsylvania Avenue SE

City

Washington

State

DC

Zip Code

20003

Outstanding Balance Beginning This Period

0.99

Transaction ID : PAYD3805

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.99

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Aristotle International, Inc.

Nature of Debt (Purpose):

Card Processing & Web Design Services

Mailing Address 205 Pennsylvania Avenue SE

City

Washington

State

DC

Zip Code

20003

Outstanding Balance Beginning This Period

20000.00

Transaction ID : PAYD3807

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

22550.99

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Aristotle International, Inc.

Nature of Debt (Purpose):
Merchant Fees

Mailing Address 205 Pennsylvania Avenue SE

City
WashingtonState
DCZip Code
20003

Outstanding Balance Beginning This Period

0.99

Transaction ID : PAYD3961

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.99

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Aristotle International, Inc.

Nature of Debt (Purpose):
Merchant Fees

Mailing Address 205 Pennsylvania Avenue SE

City
WashingtonState
DCZip Code
20003

Outstanding Balance Beginning This Period

0.99

Transaction ID : PAYD3966

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.99

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Ault, Anastasia, , ,

Nature of Debt (Purpose):
Office Supplies

Mailing Address 8686 Merced Circle, Unit 1007 D

City
Costa MesaState
CAZip Code
92626

Outstanding Balance Beginning This Period

12.71

Transaction ID : PAYD2231

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

12.71

1) **SUBTOTALS** This Period This Page (optional)..... ►

14.69

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 90 OF 99

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Ault, Anastasia, , ,

Nature of Debt (Purpose):
Office Supplies

Mailing Address 8686 Merced Circle, Unit 1007 D

City

Costa Mesa

State

CA

Zip Code

92626

Outstanding Balance Beginning This Period

28.80

Transaction ID : PAYD2696

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

28.80

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Ault, Anastasia, , ,

Nature of Debt (Purpose):
Postage

Mailing Address 8686 Merced Circle, Unit 1007 D

City

Costa Mesa

State

CA

Zip Code

92626

Outstanding Balance Beginning This Period

19.60

Transaction ID : PAYD3509

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

19.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cane, Kyleen, , ,

Nature of Debt (Purpose):
Merchant Fees

Mailing Address 3273 East Warm Springs Road

City

Henderson

State

NV

Zip Code

89014

Outstanding Balance Beginning This Period

75.46

Transaction ID : PAYD2448

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

75.46

1) **SUBTOTALS** This Period This Page (optional)..... ►

123.86

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cane, Kyleen, , ,

Nature of Debt (Purpose):
Merchant Fees

Mailing Address 3273 East Warm Springs Road

City

Henderson

State

NV

Zip Code

89014

Outstanding Balance Beginning This Period

66.72

Transaction ID : PAYD2451

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

66.72

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cane, Kyleen, , ,

Nature of Debt (Purpose):
Merchant Fees

Mailing Address 3273 East Warm Springs Road

City

Henderson

State

NV

Zip Code

89014

Outstanding Balance Beginning This Period

57.82

Transaction ID : PAYD2455

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

57.82

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cane, Kyleen, , ,

Nature of Debt (Purpose):
Loan Fee

Mailing Address 3273 East Warm Springs Road

City

Henderson

State

NV

Zip Code

89014

Outstanding Balance Beginning This Period

450.00

Transaction ID : PAYD3792

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

450.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

574.54

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cane, Kyleen, , ,

Nature of Debt (Purpose):
Loan Interest

Mailing Address 3273 East Warm Springs Road

City

Henderson

State

NV

Zip Code

89014

Outstanding Balance Beginning This Period

820.87

Transaction ID : PAYD3793

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

820.87

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Church, Judson A., , ,

Nature of Debt (Purpose):
Loan Interest Payment

Mailing Address 764 Pines Lake Drive West

City

Wayne

State

NJ

Zip Code

07470

Outstanding Balance Beginning This Period

362.00

Transaction ID : PAYD3969

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

362.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Corporation Service Company (CSC)

Nature of Debt (Purpose):
Corporate Document Services

Mailing Address P.O. Box 13397

City

Philadelphia

State

PA

Zip Code

19101

Outstanding Balance Beginning This Period

352.00

Transaction ID : PAYD1965

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

352.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

1534.87

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Corporation Service Company (CSC)

Nature of Debt (Purpose):
Interest Fee

Mailing Address P.O. Box 13397

City

Philadelphia

State

PA

Zip Code

19101

Outstanding Balance Beginning This Period

33.84

Transaction ID : PAYD2235

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

33.84

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Corporation Service Company (CSC)

Nature of Debt (Purpose):
Interest Fee

Mailing Address P.O. Box 13397

City

Philadelphia

State

PA

Zip Code

19101

Outstanding Balance Beginning This Period

24.12

Transaction ID : PAYD2701

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

24.12

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Corporation Service Company (CSC)

Nature of Debt (Purpose):
Interest Fee

Mailing Address P.O. Box 13397

City

Philadelphia

State

PA

Zip Code

19101

Outstanding Balance Beginning This Period

8.28

Transaction ID : PAYD3324

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8.28

1) **SUBTOTALS** This Period This Page (optional)..... ►

66.24

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Corporation Service Company (CSC)

Nature of Debt (Purpose):
Interest Fee

Mailing Address P.O. Box 13397

City

Philadelphia

State

PA

Zip Code

19101

Outstanding Balance Beginning This Period

8.28

Transaction ID : PAYD3512

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8.28

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Corporation Service Company (CSC)

Nature of Debt (Purpose):
Interest Fee

Mailing Address P.O. Box 13397

City

Philadelphia

State

PA

Zip Code

19101

Outstanding Balance Beginning This Period

15.84

Transaction ID : PAYD3806

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15.84

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Corporation Service Company (CSC)

Nature of Debt (Purpose):
Interest Fee

Mailing Address P.O. Box 13397

City

Philadelphia

State

PA

Zip Code

19101

Outstanding Balance Beginning This Period

9.00

Transaction ID : PAYD3967

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9.00

1) SUBTOTALS This Period This Page (optional)..... ►

33.12

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 95 OF 99

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CrossClick Media, Inc.

Nature of Debt (Purpose):
Call Center

Mailing Address 8725 S. Eastern Avenue, #200-661

City
Las VegasState
NVZip Code
89123

Outstanding Balance Beginning This Period

62747.69

Transaction ID : PAYD3962

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

62747.69

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hodgins, James P., , ,

Nature of Debt (Purpose):
Consulting Services

Mailing Address P.O. Box 3587

City
TustinState
CAZip Code
92781

Outstanding Balance Beginning This Period

1489.05

Transaction ID : PAYD3804

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1489.05

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hodgins, James P., , ,

Nature of Debt (Purpose):
Consulting Services

Mailing Address P.O. Box 3587

City
TustinState
CAZip Code
92781

Outstanding Balance Beginning This Period

9000.00

Transaction ID : PAYD3959

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9000.00

1) SUBTOTALS This Period This Page (optional)..... ►

73236.74

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 96 OF 99

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

InFind.com, Inc.

Nature of Debt (Purpose):

Management Consulting Services

Mailing Address 12021 Wilshire Blvd., Suite 634

City

Los Angeles

State

CA

Zip Code

90025

Outstanding Balance Beginning This Period

6100.00

Transaction ID : PAYD1975

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6100.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

InFind.com, Inc.

Nature of Debt (Purpose):

Management Consulting Services

Mailing Address 12021 Wilshire Blvd., Suite 634

City

Los Angeles

State

CA

Zip Code

90025

Outstanding Balance Beginning This Period

20000.00

Transaction ID : PAYD2183

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Jeff Taylor Graphics

Nature of Debt (Purpose):

Design of Logo, Letterhead and Envelopes

Mailing Address 2633 Lincoln Blvd., Suite 837

City

Santa Monica

State

CA

Zip Code

90405

Outstanding Balance Beginning This Period

2075.00

Transaction ID : PAYD2201

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2075.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

28175.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 97 OF 99

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

John Cowan Law

Nature of Debt (Purpose):
Legal Services

Mailing Address 100 Pine Street, Suite 1250

City

San Francisco

State

CA

Zip Code

94111

Outstanding Balance Beginning This Period

15550.15

Transaction ID : PAYD1976

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15550.15

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Propel Management Group, Inc.

Nature of Debt (Purpose):
Consulting Services for Call Center

Mailing Address 3625 W. Macarthur Blvd., #302.

City

Santa Ana

State

CA

Zip Code

92704

Outstanding Balance Beginning This Period

726.78

Transaction ID : PAYD2239

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

726.78

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Propel Management Group, Inc.

Nature of Debt (Purpose):
Professional Services

Mailing Address 3625 W. Macarthur Blvd., #302.

City

Santa Ana

State

CA

Zip Code

92704

Outstanding Balance Beginning This Period

129.55

Transaction ID : PAYD3507

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

129.55

1) **SUBTOTALS** This Period This Page (optional)..... ►

16406.48

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Spaziano, Joe, , ,

Nature of Debt (Purpose):
Computer Services

Mailing Address 1928 E. Van Owen Avenue, Apt. A

City
OrangeState
CAZip Code
92867

Outstanding Balance Beginning This Period

80.96

Transaction ID : PAYD3516

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

80.96

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

State of California-Franchise Tax Board

Nature of Debt (Purpose):
Penalty Fee

Mailing Address P.O. Box 942857

City
SacramentoState
CAZip Code
94257

Outstanding Balance Beginning This Period

250.00

Transaction ID : PAYD3963

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Womble Carlyle Sandridge & Rice, LLP

Nature of Debt (Purpose):
Legal Services

Mailing Address 1200 19th Street NW, Suite 500

City
WashingtonState
DCZip Code
20036

Outstanding Balance Beginning This Period

12264.92

Transaction ID : PAYD2208

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

12264.92

1) **SUBTOTALS** This Period This Page (optional)..... ►

12595.88

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Womble Carlyle Sandridge & Rice, LLP

Nature of Debt (Purpose):

Legal Services

Mailing Address 1200 19th Street NW, Suite 500

City

Washington

State

DC

Zip Code

20036

Outstanding Balance Beginning This Period

436.00

Transaction ID : PAYD2722

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

436.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

436.00

2) **TOTALS** This Period (last page this line number only)..... ►

155748.41

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

270678.21

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

426426.62